



RECEIPT

Heraeus 383-KGB  
P09860US

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

APPLICANTS : Andrej Albach  
SERIAL NO. : 09/995,348  
FILED : 11/27/2001  
FOR : Syringe for the metered delivery of dental materials

RECEIVED  
MAR 18 2003  
TECHNOLOGY CENTER R3700

GROUP ART UNIT : 3732

EXAMINER :

Hon. Commissioner of Patents  
and Trademarks  
Washington, D.C. 20231

February 13, 2002

**REQUEST FOR CORRECTED FILING RECEIPT**

SIR:

The filing receipt in the above-identified application was found to contain the

following errors:

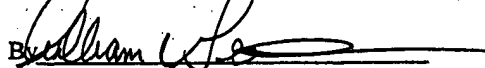
The inventor resides in WEHRHEIM, GERMANY

Foreign applications- should read: GERMANY 100 60 614.8 12/05/2000

Please issue a corrected filing receipt at your earliest convenience.

Respectfully submitted,

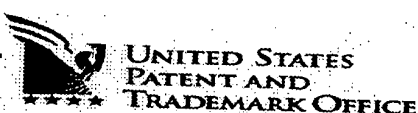
NORRIS McLAUGHLIN & MARCUS



William C. Gerstenzang  
Reg. No. 27,552

WCG/hg

220 East 42<sup>nd</sup> Street 30Fl  
New York, NY 10017  
(212) 808-0700



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Commissioner for Patents  
Washington, DC 20231  
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 9035

<b>SERIAL NUMBER</b> 09/995,348	<b>FILING DATE</b> 11/27/2001 <b>RULE</b>	<b>CLASS</b> 433	<b>GROUP ART UNIT</b> 3732	<b>ATTORNEY DOCKET NO.</b> Heraeus 383-WCG P09860US
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**APPLICANTS**

Andrej Albach, Wehrheim, GERMANY;

\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

GERMANY 100 60 614.8 12/05/2000

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 12/07/2001

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Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 1	<b>TOTAL CLAIMS</b> 8	<b>INDEPENDENT CLAIMS</b> 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

**ADDRESS**

Kurt G Briscoe  
NORRIS, MCLAUGHLIN & MARCUS P.A.  
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30th Floor  
New York, NY 10017

**TITLE**

Syringe for the metered delivery of dental materials

<b>FILING FEE RECEIVED</b> 1150	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
		<input type="checkbox"/> 1.18 Fees ( Issue )
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit